

**COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION
AND POWER OF ATTORNEY**

- ☐ Declaration Submitted with Initial Filing OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (*if only one name is listed below*) or an original, first, and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AKT INHIBITORS, PHARMACEUTICAL COMPOSITIONS, AND USES THEREOF

the specification of which:

- ☐ is attached hereto.
☒ was filed on March 2, 2005 as Application No. 10/526,851 and was amended on (*if applicable*).
☐ was filed by Express Mail No. as Application No. *not known yet*, and was amended on (*if applicable*).
☐ was filed on as PCT International Application No. PCT/ and was amended on (*if any*).

I state that I have reviewed and understand the contents of the specification identified above, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I claim foreign priority benefits under 35 USC 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application(s) designating at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application(s) for patent, utility model, design registration, inventor's or plant breeder's rights certificate(s), or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter and having a filing date before that of the application(s) from which the benefit of priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Claimed		Certified Copy Attached?	
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In re Appln. of Kozikowski et al.
U.S. Patent Appln. No. 10/526,851

As a named inventor, I hereby appoint the attorneys and patent agents of the National Institutes of Health, Office of Technology Transfer, and of Leydig, Voit & Mayer, Ltd., who are identified with the following Customer Number, to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith:

45733

I further direct that correspondence concerning this application be directed to Leydig, Voit & Mayer, Ltd., as Customer Number:

45733

I declare that all statements made herein of my own knowledge are true, that all statements made on information and belief are believed to be true, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Alan P. Kozikowski

Inventor's signature _____

Date _____

Country of Citizenship: US

Residence: Chicago, IL
(city/state or country)

Post Office Address: 2128 North Racine Avenue, Chicago, IL 60614
(complete mailing address)

Full name of **third joint inventor**, if any: Haiying Sun

Inventor's signature _____

Date _____

Country of Citizenship: China

Residence: Ann Arbor, MI
(city/state or country)

Post Office Address: 1246 North Bay Drive, Ann Arbor, MI 48103
(complete mailing address)

In re Appln. of Kozikowski et al.
U.S. Patent Appln. No. 10/526,851

Full name of **fourth joint inventor**, if any: John Brognard

Inventor's signature _____

Date _____

Country of Citizenship: US

Residence: Carlsbad, CA
(city/state or country)

Post Office Address: 821 Skysail Avenue, Carlsbad, CA 92009
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Full name of **second joint inventor**, if any: Phillip Dennis

Inventor's signature _____

Date _____

Country of Citizenship: US

Residence: Ellicott City, MD
(city/state or country)

Post Office Address: 2327 Daniels Road, Ellicott City, MD 21043
(complete mailing address)

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